

# AC SIS DATA ELEMENT DICTIONARY

## FIELD NAME

## ADD DATE

## REQUIRED FIELD?

Y

Admission Date

DATA TYPE: **Character** FIELD LENGTH: **10** DECIMAL SIZE: **0**

DESCRIPTION: Date of client's first admission or new admission date after termination or administrative closure

FORMAT: MM/DD/YYYY

## FIELD NAME

## AD MATNDSCH

## REQUIRED FIELD?

Y

Admission School Attendance

DATA TYPE: **Character** FIELD LENGTH: **1** DECIMAL SIZE: **0**

DESCRIPTION: School Attendance at Admission

FORMAT: Y-Yes N-No

## FIELD NAME

## ADM CLOSETD

## REQUIRED FIELD?

C

Administrative Closure Date

DATA TYPE: **Character** FIELD LENGTH: **10** DECIMAL SIZE: **0**

DESCRIPTION: Date of administrative closure by ACSIS

FORMAT: MM/DD/YYYY

## FIELD NAME

## ADULT DATE

## REQUIRED FIELD?

R

Adult Functioning Score Date

DATA TYPE: **Character** FIELD LENGTH: **10** DECIMAL SIZE: **0**

DESCRIPTION: Date of last GAF Score

FORMAT: MM/DD/YYYY

FIELD NAME	ADULTFUNC	REQUIRED FIELD?	R
	Adult Functionng Score		
	DATA TYPE: <b>Character</b>	FIELD LENGTH: <b>3</b>	DECIMAL SIZE: <b>0</b>
	DESCRIPTION: Adult functioning score ( GAF)		
	FORMAT:		

FIELD NAME	ADULTUPDT	REQUIRED FIELD?	R
	Adult Functioning Score Update		
	DATA TYPE: <b>Character</b>	FIELD LENGTH: <b>1</b>	DECIMAL SIZE: <b>0</b>
	DESCRIPTION: Time Period for GAF Score		
	FORMAT: Code Table		

FIELD NAME	ARRESTS	REQUIRED FIELD?	Y
	Number of Arrests		
	DATA TYPE: <b>Character</b>	FIELD LENGTH: <b>2</b>	DECIMAL SIZE: <b>0</b>
	DESCRIPTION: Number of arrests in past 12 months		
	FORMAT:		

FIELD NAME	ATNDSCHOOL	REQUIRED FIELD?	Y
	School Attendance		
	DATA TYPE: <b>Character</b>	FIELD LENGTH: <b>2</b>	DECIMAL SIZE: <b>0</b>
	DESCRIPTION: Client's school attendance		
	FORMAT: Code Table		

FIELD NAME	AXIS1DIAG1	REQUIRED FIELD?	Y
	Axis I Primary Diagnosis		

	DATA TYPE:	Character	FIELD LENGTH:	6	DECIMAL SIZE:	0
	DESCRIPTION:	Primary diagnosis on Axis I				
	FORMAT:	DSM IV TR				

FIELD NAME	AXIS1DIAG2	REQUIRED FIELD?	R
	Axis I Secondary Diagnosis		
	DATA TYPE: Character	FIELD LENGTH: 6	DECIMAL SIZE: 0
	DESCRIPTION: Secondary diagnosis on Axis I		
	FORMAT: DSM IV TR		

FIELD NAME	AXIS2DIAG1	REQUIRED FIELD?	R
	Axis II Primary diagnosis		
	DATA TYPE: Character	FIELD LENGTH: 6	DECIMAL SIZE: 0
	DESCRIPTION: Primary diagnosis on Axis II		
	FORMAT: DSM IV TR		

FIELD NAME	AXIS2DIAG2	REQUIRED FIELD?	R
	Axis II Secondary Diagnosis		
	DATA TYPE: Character	FIELD LENGTH: 6	DECIMAL SIZE: 0
	DESCRIPTION: Secondary diagnosis on Axis II		
	FORMAT: DSM IV TR		

FIELD NAME	AXIS3DIAG1	REQUIRED FIELD?	R
	Axis III Primary Diagnosis		
	DATA TYPE: Character	FIELD LENGTH: 6	DECIMAL SIZE: 0
	DESCRIPTION: Primary diagnosis on Axis III		
	FORMAT: ICD-9-CM		

FIELD NAME	AXIS3DIAG2	REQUIRED FIELD?	R
	AxisIII Secondary Diagnosis		
	DATA TYPE: <b>Character</b>	FIELD LENGTH: <b>6</b>	DECIMAL SIZE: <b>0</b>
	DESCRIPTION: Secondary diagnosis on Axis III		
	FORMAT: ICD-9-CM		

FIELD NAME	CHILDDATE	REQUIRED FIELD?	R
	Child Functioniing Score Date		
	DATA TYPE: <b>Character</b>	FIELD LENGTH: <b>10</b>	DECIMAL SIZE: <b>0</b>
	DESCRIPTION: Date of last functioning level assessment		
	FORMAT: MM/DD/YYYY		

FIELD NAME	CHILDFUNC	REQUIRED FIELD?	R
	Child Functioning Score		
	DATA TYPE: <b>Character</b>	FIELD LENGTH: <b>5</b>	DECIMAL SIZE: <b>0</b>
	DESCRIPTION: Child Functioning Level Score		
	FORMAT: Instrument undertermined at this		

FIELD NAME	CHILDUPDT	REQUIRED FIELD?	R
	Child Functioning Score Update		
	DATA TYPE: <b>Character</b>	FIELD LENGTH: <b>1</b>	DECIMAL SIZE: <b>0</b>
	DESCRIPTION: Time Period for Functioning Score		
	FORMAT: Code Table		

FIELD NAME	CLIENT	REQUIRED FIELD?	Y
	Client Case Number		

DATA TYPE: **Character** FIELD LENGTH: **6** DECIMAL SIZE: **0**

DESCRIPTION: Case number assigned to the client by the CSP

FORMAT:

**FIELD NAME****DUALDIAG****REQUIRED FIELD?****Y**

Dually diagnosed

DATA TYPE: **Character** FIELD LENGTH: **2** DECIMAL SIZE: **0**

DESCRIPTION: Dual diagnosis code

FORMAT: Code Table

**FIELD NAME****EDUCATION****REQUIRED FIELD?****Y**

Highest Grade Completed

DATA TYPE: **Character** FIELD LENGTH: **2** DECIMAL SIZE: **0**

DESCRIPTION: Code for highest grade completed by client

FORMAT: Code Table

**FIELD NAME****EMPLOY****REQUIRED FIELD?****Y**

Employment status

DATA TYPE: **Character** FIELD LENGTH: **1** DECIMAL SIZE: **0**

DESCRIPTION: Employment status of client at time of admission/readmission

FORMAT: Code Table

**FIELD NAME****EXPELLED****REQUIRED FIELD?****Y**

Expelled from School

DATA TYPE: **Character** FIELD LENGTH: **1** DECIMAL SIZE: **0**

DESCRIPTION: Expelled during past school year

FORMAT: Y-Yes N-NO

FIELD NAME	FIRSTN	REQUIRED FIELD?	Y
	First name of Client		
	DATA TYPE: <b>Character</b>	FIELD LENGTH: <b>15</b>	DECIMAL SIZE: <b>0</b>
	DESCRIPTION: First Name of the Client		
	FORMAT: Complete first name, not initial		

FIELD NAME	GUARDSHIP	REQUIRED FIELD?	Y
	Guardianship code		
	DATA TYPE: <b>Character</b>	FIELD LENGTH: <b>3</b>	DECIMAL SIZE: <b>0</b>
	DESCRIPTION: Guardianship Code		
	FORMAT: Code Table		

FIELD NAME	HEARING	REQUIRED FIELD?	Y
	Hearing Status of client		
	DATA TYPE: <b>Character</b>	FIELD LENGTH: <b>1</b>	DECIMAL SIZE: <b>0</b>
	DESCRIPTION: Code to identify functional hearing status of client		
	FORMAT: Code Table		

FIELD NAME	HISPANIC	REQUIRED FIELD?	Y
	Hispanic origin of client		
	DATA TYPE: <b>Character</b>	FIELD LENGTH: <b>1</b>	DECIMAL SIZE: <b>0</b>
	DESCRIPTION: Hispanic origin of client based on federal reporting guidelines		
	FORMAT: Code Table		

FIELD NAME	INCOME	REQUIRED FIELD?	Y
	Income amount		

	DATA TYPE:	<b>Numeric</b>	FIELD LENGTH:	<b>11</b>	DECIMAL SIZE:	<b>2</b>
	DESCRIPTION:	Amount of the client's income				
	FORMAT:	Amount of the client's income				

FIELD NAME	LASTN	REQUIRED FIELD?	Y
	Client Last Name		
	DATA TYPE: Character	FIELD LENGTH: 20	DECIMAL SIZE: 0
	DESCRIPTION: Client's Last Name		
	FORMAT: Complete last name, not initial		

FIELD NAME	LASTUPDT	REQUIRED FIELD?	Y
	Date Record Last Updated		
	DATA TYPE: Character	FIELD LENGTH: 10	DECIMAL SIZE: 0
	DESCRIPTION: The date the record was last updated		
	FORMAT: MM/DD/YYYY		

FIELD NAME	LEGAL	REQUIRED FIELD?	Y
	Legal status of client		
	DATA TYPE: Character	FIELD LENGTH: 2	DECIMAL SIZE: 0
	DESCRIPTION: Legal status of client at time of admission/readmission		
	FORMAT: Code Table		

FIELD NAME	LONGDOB	REQUIRED FIELD?	Y
	Date of Birth with Century		
	DATA TYPE: Character	FIELD LENGTH: 10	DECIMAL SIZE: 0
	DESCRIPTION: Date of birth including the century MM/DD/YYYY		
	FORMAT: MM/DD/YYYY		

FIELD NAME	MAILADD1	REQUIRED FIELD?	Y
	Mailing Address Street		
	DATA TYPE: <b>Character</b>	FIELD LENGTH: <b>30</b>	DECIMAL SIZE: <b>0</b>
	DESCRIPTION: Client's Mailing Street Address		
	FORMAT:		

FIELD NAME	MAILCITY	REQUIRED FIELD?	Y
	Mailing Address City		
	DATA TYPE: <b>Character</b>	FIELD LENGTH: <b>15</b>	DECIMAL SIZE: <b>0</b>
	DESCRIPTION: City of Client's mailing address		
	FORMAT:		

FIELD NAME	MAILCNTY	REQUIRED FIELD?	Y
	County of residence		
	DATA TYPE: <b>Character</b>	FIELD LENGTH: <b>3</b>	DECIMAL SIZE: <b>0</b>
	DESCRIPTION: Code to denote client's county of residence		
	FORMAT:		

FIELD NAME	MAILSTATE	REQUIRED FIELD?	Y
	Mailing address state code		
	DATA TYPE: <b>Character</b>	FIELD LENGTH: <b>2</b>	DECIMAL SIZE: <b>0</b>
	DESCRIPTION: Postal code for state in client's mailing address		
	FORMAT:		

FIELD NAME	MAILZIP	REQUIRED FIELD?	Y
	Mailing address zip code		



	DATA TYPE:	<b>Character</b>	FIELD LENGTH:	<b>10</b>	DECIMAL SIZE:	<b>0</b>
	DESCRIPTION:	Zip code of client's mailing address Format 99999-9999				
	FORMAT:					

FIELD NAME	MARITAL	REQUIRED FIELD?	Y
	Marital Status		
	DATA TYPE:	Character	FIELD LENGTH: 1 DECIMAL SIZE: 0
	DESCRIPTION:	Marital status of client at time of admission/readmission	
	FORMAT:	Code Table	

FIELD NAME	MEDICAID	REQUIRED FIELD?	Y
	Medicaid Number		
	DATA TYPE: Character	FIELD LENGTH: 13	DECIMAL SIZE: 0
	DESCRIPTION: Client's Medicaid Number		
	FORMAT: Required if client is Medicaid elig		

FIELD NAME	ORGID	REQUIRED FIELD?	Y
	Organization ID		
	DATA TYPE:	Character	FIELD LENGTH: 3
			DECIMAL SIZE: 0
	DESCRIPTION:	Provider ID of the CSP as assigned by DMH/MR	
	FORMAT:		

FIELD NAME	RACE	REQUIRED FIELD?	Y
	Race of Client		
	DATA TYPE: Character	FIELD LENGTH: 2	DECIMAL SIZE: 0
	DESCRIPTION: Race (ethnicity) of client		
	FORMAT: Code Table		

FIELD NAME	RESARR	REQUIRED FIELD?	Y
	Residential Arrangement		
	DATA TYPE: <b>Character</b>	FIELD LENGTH: <b>1</b>	DECIMAL SIZE: <b>0</b>
	DESCRIPTION: Residential setting of client		
	FORMAT: Code Table		

FIELD NAME	SCHOOLTYPE	REQUIRED FIELD?	Y
	Type School attended		
	DATA TYPE: <b>Character</b>	FIELD LENGTH: <b>2</b>	DECIMAL SIZE: <b>0</b>
	DESCRIPTION: Type of School Attended		
	FORMAT: Code Table		

FIELD NAME	SEX	REQUIRED FIELD?	Y
	Sex of client		
	DATA TYPE: <b>Character</b>	FIELD LENGTH: <b>1</b>	DECIMAL SIZE: <b>0</b>
	DESCRIPTION: Client's sex		
	FORMAT: Code Table		

FIELD NAME	SMI	REQUIRED FIELD?	Y
	SMI/SED status		
	DATA TYPE: <b>Character</b>	FIELD LENGTH: <b>1</b>	DECIMAL SIZE: <b>0</b>
	DESCRIPTION: Code to indicate if client meets SMI or SED criteria		
	FORMAT: Code Table		

FIELD NAME	SSN	REQUIRED FIELD?	Y
	Social security number		

DATA TYPE: **Character** FIELD LENGTH: **11** DECIMAL SIZE: **0**

DESCRIPTION: Client's SSN. Construct a pseudo SSN as follows:  
"S" + last two digits of the ORGID + client's 6-digit case number  
S08-00-4168

FORMAT:

**FIELD NAME** **SUSPENDED** **REQUIRED FIELD?** **Y**  
Suspended from School

DATA TYPE: **Character** FIELD LENGTH: **2** DECIMAL SIZE: **0**

DESCRIPTION: Number of times suspended from school last school year

FORMAT:

**FIELD NAME** **TERMDATE** **REQUIRED FIELD?** **C**  
Termination Date

DATA TYPE: **Character** FIELD LENGTH: **10** DECIMAL SIZE: **0**

DESCRIPTION: Date record closed

FORMAT: MM/DD/YYYY

**FIELD NAME** **TREASON** **REQUIRED FIELD?** **C**  
Termination reason

DATA TYPE: **Character** FIELD LENGTH: **1** DECIMAL SIZE: **0**

DESCRIPTION: Reason client services terminated

FORMAT: Required if TERMDATE not = BI

**FIELD NAME** **UPDATEDTE** **REQUIRED FIELD?** **Y**  
Date of annual update

DATA TYPE: **Character** FIELD LENGTH: **10** DECIMAL SIZE: **0**

DESCRIPTION: Date of last annual update

FORMAT: MM/DD/YYYY

FIELD NAME	UPDATNDSCH	REQUIRED FIELD?	Y
	Update School Attendance		
	DATA TYPE: <b>Character</b>	FIELD LENGTH: <b>1</b>	DECIMAL SIZE: <b>0</b>
	DESCRIPTION: School Attendance at Annual Update		
	FORMAT: Code Table		

FIELD NAME	VETERAN	REQUIRED FIELD?	Y
	Veteran Status		
	DATA TYPE: <b>Character</b>	FIELD LENGTH: <b>1</b>	DECIMAL SIZE: <b>0</b>
	DESCRIPTION: Veteran status of client		
	FORMAT: Code Table		